National Stage Processing

Paralega cialis

PATENT APPLICATION FEE DETERMINATION HE CORD Effective October 1, 2000

Application or Docket Number

CLAIMS AS FILED - PART I (Column 2) (Column 2)								SMALL ENTITY TYPE		O D	OTHER SMALL	
TOTAL CLAIMS			(Column	1)	(Colur	nn 2)	ŕ			OR I i		
TOTAL CLAIMS								RATE	FEĘ	}	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE		OR	BASIC FEE	100
TOTAL CHARGEABLE CLAIMS			minus 20=		•			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			→ min	us 3 =				X40=		OR	X80=	
MU	LTIPLE DEPEN	DENT CLAIM P	RESENT					+135=		OR	+270=	
* If	the difference	in column 1 is	less than ze	ero, enter "0" in column 2				TOTAL		OR	TOTAL	100
	C	LAIMS AS A	AMENDED - PART II								OTHER	
,		(Column 1)	100 miles 100 mi		mn 2)	(Column 3)	1 -	SMALL		OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUN PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=]	X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=] [X40=		OR	X80=	
	FIRST PRESE	NTATION OF M	ULTIPLE DEP	ENDEN	T CLAIM		1	+135=		OR	+270=	
							ı.	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
	(Column 1) (Column 2) (Column 3)							ADDII. PEE I			ADDIT. I EE	
_	TAMES DES	CLAIMS		HIG	HEST		٦ r		ADDI-			ADDI-
AMENDMENT B		REMAINING AFTER AMENDMENT		PREV	MBER NOUSLY D FOR	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
ME	Independent	*	Minus	***	•	=] [X40=		OR	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									011		
						,		+135=		OR	+270=	
							_	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
AMENDMENT C		(Column 1) CLAIMS REMAINING AFTER		HIG NUI PREV	IMN 2) HEST MBER IOUSLY D FOR	PRESENT EXTRA	֓֟֟֟֓֟֟֟֓֓֟֟֟֓֟֟֓֟֟֟֓֓֟֟֓֓֟֟֓֓֟֟֓֓֟֟֓֓	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	AMENDMENT .	Minus	**	· ·	=	1	X\$ 9=	FCC_		X\$18=	, , , ,
EN	Independent	*	Minus	***			┪╏			OR		
AN		NTATION OF M		PENDEN	IT CLAIM		1	X40=		OR	X80=	ļ
								+135=		OR	+270=	
**	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."											
	The "Highest Num	nber Previously Pa	aid For (Total o	r Indeper	dent) is the	e highest numb	oer fou	und in the ap	propriate bo	x in co	olumn 1.	